

Please type a plus sign (+) inside this box → ☐

Approved for use through 10/31/2002 OMB 0651-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e) required))	Attorney Docket Number	EQUUS 060A
	First Named Inventor	leon C. Chen
	COMPLETE IF KNOWN	
	Application Number	Unknown
	Filing Date	Herewith
	Group Art Unit	Unknown
	Examiner Name	Unknown

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD AND SYSTEM FOR COMPUTER NETWORK IMPLEMENTED VEHICLE DIAGNOSTICS

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) _____ as United States Application Number or PCT International Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

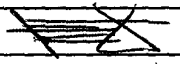
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

Please type a plus sign (+) inside this box → ☐Approved for use through 10/31/2002 OMB 0651-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

DECLARATION — Utility or Design Patent Application			
Direct all correspondence to: <input type="checkbox"/> Customer Number _____ OR <input checked="" type="checkbox"/> Correspondence Address Below or Bard Code Label _____			
Name: Bruce B. Brunda			
Address: 75 Enterprise, Suite 250			
City: Aliso Viejo	State	CA	ZIP 92656
Country: USA	Telephone: (949) 855-1246		Fax (949) 855-6371
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: Leon C. Chen (first and middle [if any])		Family Name or Surname	
Inventor's Signature 		Date 9/21/01	
Residence: City Laguna Hills	State CA	Country USA	Citizenship USA
Mailing Address 26131 Red Coral			
City Laguna Hills	State CA	ZIP 92653	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB02A attached hereto			

Please type a plus sign (+) inside this box ☐

PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	Unknown
	Filing Date	Herewith
	First Named Inventor	leon C. Chen
	Group Art Unit	Unknown
	Examiner Name	Unknown
	Attorney Docket Number	EQUUS-060A

I hereby appoint:



Practitioners at Customer Number 007663

Attention: Bruce B. Brunda
75 Enterprise, Suite 250
Aliso Viejo, CA 92656

Place Customer Number Bar

Code Label here

OR



Practitioner(s) named below:

Name

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:



The above-mentioned Customer Number. Attention: [attorney name]

OR



Practitioners at Customer Number _____

Attention: [attorney name]

Code Label here

OR



Firm or Individual
Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I am the.



Applicant.



Assignee of record of the entire interest

Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE OF Applicant or Assignee of Record

Name

Leon C. Chen

Signature



Date

9/21/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted